



# Walk In Application Residential Building Permit Primary Structures



(Do Not Fax or E-mail Application)

## Please PRINT Clearly

Applicant's Name\*: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Best way to deliver plan review comments: (check only one): ☐ Email ☐ Fax

Applicant's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\*A legible copy of a current government photo ID is required to be submitted by the applicant.

**Project Address:** \_\_\_\_\_

Please check only one:

☐ **Single-family & Townhouse**

☐ **Two-family**

☐ **Garage conversion** (skip the next question)

☐ **Manufactured Home** (skip the next question)

☐ **Temporary sales office** (skip the next question)

☐ **Temporary construction office** (skip the next question)

Please check only one:

☐ **New construction** ☐ **Addition** ☐ **Remodel/Alterations/Repair** ☐ **Demolition** ☐ **Move**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinances regulating construction, the performance of construction or the use of any land or buildings.

Print Name of Permit Applicant \_\_\_\_\_ DATE \_\_\_\_\_

*Signature of Permit Applicant* \_\_\_\_\_

Applicant is \_\_\_\_ Contractor, \_\_\_\_ Homeowner or \_\_\_\_ Authorized Agent

If applicant is contractor, list name of company: \_\_\_\_\_

## For "New" or "Addition" to Single- and Two-Family Homes

Declared Fair Market Construction Valuation: \$ \_\_\_\_\_

Deed Restriction Compliance Agreement (must check one only):

☐ There are no restrictions    ☐ I will comply with deed restrictions    ☐ I will not comply with the restrictions

Provide a Brief Description of Proposed Work: \_\_\_\_\_

Number of Stories: \_\_\_\_\_

Living Area of 1<sup>st</sup> Floor (in square feet): \_\_\_\_\_ (Not Required for **Addition**)

Living Area of 2nd Floor (in square feet): \_\_\_\_\_ (Not Required for **Addition**)

Area of the Garage (in square feet): \_\_\_\_\_ (Not Required for **Addition**)

Type of Drainage (must check one only):

- ☐ DPW Accepted Alternate
- ☐ Type "A" Lot Drainage, All to the front
- ☐ Type "B" Lot Drainage, To front and rear
- ☐ Type "C" Lot Drainage, All to the rear
- ☐ Lot Drainage Unknown

Energy Code Compliance New Construction (must check one only):

- ☐ Chapter 4 IECC
- ☐ Energy Star
- ☐ IC3
- ☐ REScheck

Model Home: ..... ☐ Yes    ☐ No

Corner Lot: ..... ☐ Yes    ☐ No

Area of Addition (in square feet): \_\_\_\_\_ (Not required for **New Construction**)

Percentage of masonry covering on existing structure: \_\_\_\_\_% (Not required for **New Construction**)

Electric Service: ..... ☐ Yes    ☐ No

Gas Service: ..... ☐ Yes    ☐ No

Are inspection services provided by a Third Party Organization? ..... ☐ Yes    ☐ No

If yes, what is the name of the Third Party Organization (check only one):

- ☐ Bureau Veritas
- ☐ Inspection Tech Services
- ☐ Lone Star Professional Services
- ☐ Metro Code Analysis
- ☐ North Texas Inspection Services
- ☐ Winston Services

## ***For “Remodel/Alterations/Repair” of One- and Two-Family Home***

Declared Fair Market Construction Valuation: \$ \_\_\_\_\_

Project Scope:

☐ Foundation Repair    ☐ Roof Replacement    ☐ Other

Deed Restriction Compliance Agreement (must check one only):

☐ There are no restrictions    ☐ I will comply with deed restrictions    ☐ I will not comply with the restrictions

Provide a Brief Description of Proposed Work: \_\_\_\_\_

\_\_\_\_\_

Number of Stories: \_\_\_\_\_

Area of the Garage (in square feet): \_\_\_\_\_ (Garage Conversion Only)

Energy Code Compliance (check one only):

- ☐ REScheck  
☐ Chapter 4 IECC  
☐ None - Building is Not Heated or Cooled

Electric Service: ..... ☐ Yes    ☐ No

Gas Service: ..... ☐ Yes    ☐ No

Are inspection services provided by a Third Party Organization? ..... ☐ Yes    ☐ No

If yes, what is the name of the Third Party Organization (check only one):

- ☐ Bureau Veritas  
☐ Inspection Tech Services  
☐ Lone Star Professional Services  
☐ Metro Code Analysis  
☐ North Texas Inspection Services  
☐ Winston Services

## ***For “Temporary Construction Office” or “Temporary Sales Office”***

Electric Service: ..... ☐ Yes    ☐ No

Corner Lot: ..... ☐ Yes    ☐ No

## ***For All “Demolitions”***

Number of structures to be demolished (do not count portable buildings): \_\_\_\_\_

## ***For All “Moves”***

Type of Move:

☐ Into the City    ☐ Out of the City    ☐ Within the City    ☐ Through the City

Number of days to move structures: \_\_\_\_\_

Area of the first structure to be moved (in square feet): \_\_\_\_\_

Area of the second structure to be moved (in square feet): \_\_\_\_\_

Area of the third structure to be moved (in square feet): \_\_\_\_\_

Number of structures to be moved: \_\_\_\_\_

## ***For All “Manufactured Homes”***

Declared Fair Market Construction Valuation:     \$\_\_\_\_\_

Provide a Brief Description of Proposed Work: \_\_\_\_\_

Living Area of 1<sup>st</sup> Floor (in square feet): \_\_\_\_\_

Type of Drainage (must check one only):

- ☐ DPW Accepted Alternate
- ☐ Type “A” Lot Drainage, All to the front
- ☐ Type “B” Lot Drainage, To front and rear
- ☐ Type “C” Lot Drainage, All to the rear
- ☐ Lot Drainage Unknown

Electric Service: ..... ☐ Yes    ☐ No

Gas Service: ..... ☐ Yes    ☐ No

Will the manufactured home be located in a mobile home park? ..... ☐ Yes    ☐ No